

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE U.S. POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. Box 1450 Alexandria, VA 22313-1450, ON

J-2-04
SIGNATURE DATE

D-2-04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

: Christian Lorenz et al.

Serial No.

10/035,767

Filing Date

December 26, 2001

For

GAS BAG RESTRAINING

DEVICE

Group Art Unit

3616

Examiner

G.D. Spisich

Attorney Docket No.

TRW (ASG) 6011

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 RECEIVED

MAR 1 5 2004

AMENDMENT

GROUP 3600

Sir:

In response to the Office Action dated October 3, 2003, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which being on page 4 of this papers.

Remarks/Arguments begin on page 11 of this paper.

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03/11/2004 WABDELR1 00000009 10035767

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		AMENDMENT TRANSMITTAL									
	Warnin	Warning: Failure to file a complete response in compliance with § 1.135(c) leads to a reduction in patent term adjustment - See § 1.704(c)(7).									
≆ مير	1.	1. Transmitted herewith is an amendment for this application.									
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		CERTIFICATION UNDER 37 CFR §§ 1.8(a) and 1.10* (When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)									
	I hereb	I hereby certify that, on the date shown below, this correspondence is being:									
•	•	MAILING									
•	\boxtimes				States Postal 9 a, VA 22313-14		in an envelope	addressed to	Commissioner for	Patents	
			37 C.	F.R. § 1.8	(a)		_	37 C.F.R.	•		
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		transmitted by facsimile to the Patent and Trademark Office, (703)							Dur		
	Date: <u>f</u>	Date: March 3, 2004 Deborah Denn (type or print name of person certifying)									
							(type or print nai	ne or person ce	naying)		

*Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

EXTENSION OF TERM

NOTE: "Extension of Time in Patent Cases (Supplement Amendments) – If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 CFR 1.645 for extensions of time in interference proceedings, and 37 CFR 1.550(c) for extensions of time in reexamination proceedings.

NOTE: 37 C.F.R. § 1.740(b) "...an applicant shall be deemed to have failed to engage in reasonable efforts to conclude processing or examination of an application for the cumulative total of any periods of time in excess of three months that are taken to reply to any notice or action by the Office making any rejection, objection, argument, or other request, measuring such three-month period from the date the notice or action was mailed or given to the applicant, in which case the period of adjustment set forth in § 1.703 shall be reduced by the number of days, if any, beginning on the date after the date that is three months after the date of mailing or transmission of the Office communication notifying the applicant of the rejection, objection, argument, or other request and ending on the date the reply was filed. The period, or shortened statutory period, for reply that is set in the Office action or notice has not effect on the three-month period set forth in this paragraph."

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

(complete (a) or (b), as applicable)

(a) Applicant petitions for an extension of time under 37 C.F.R. § 1.136 (fees: 37 C.F.R. § 1.17(1)-(4) for the total number of months check below:

	Extension	Fee for other than	Fee for
	(months)	small entity	small entity
	one month	\$ 110.00	\$ 55.00
\boxtimes	two months	\$ 420.00	\$210.00
	three months	\$ 950.00	\$475.00
	four months	\$1,480.00	\$740.00

Fee \$ 420.00

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next time, if applicable)

An extension for ____ months has already been secured. The fee paid therefor of \$___ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$
OR

(b) Applicant believes that no extension of term is required. However, this is a conditional petition being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-d)) has been calculated as shown below:

(Col. 1)			(Col. 2)	(Col. 3)	SMA	LL ENTITY		OTHER THAN A SMALL ENTITY		
	CLAIMS REMAINING AFTER AMENDMENT	-	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE .	OR	RATE	ADDIT. FEE	
TOTAL	*15	MINUS	** 20	=	X\$ 9=	\$		X\$ 18=	\$-0-	
INDEP.	*5	MINUS	***3	=2	X\$ 43=	\$		X\$ 86=	\$172.00	
FIRS	T PRESENTAT	ION OF M	ULTIPLE DEP. CLAIM	=	X\$145=	\$		X\$290=	\$	
				AD	TOTAL DIT. FEE	\$	OR	TOTAL ADDIT. FEE	\$172.00	

- If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

 If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

 If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

 The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box In Col. 1 of a prior amendment or the number of claims originally filed.

WARNING

"After final rejection or action (§1.113) amendments may be made canceling claims or complying with any requirement of form which has been made." 37 C.F.R. § 1.116(a)(emphasis added).

(complete (c) or (d), as applicable)

(c)		No additional fee for claims is required.	RECEIVE						
		OR	MAR 1 5 2004						
(d)	\boxtimes	Total additional fee for claims required \$172.00	GROUP 360						
		FEE PAYMENT							
\boxtimes	Atta	Attached is a ⊠ check ☐ money order in the amount of \$592.00							
\boxtimes	Authorization is hereby made to charge the amount of \$								
	\boxtimes	to Deposit Account No. 20-0090.							
		to Credit card as shown on the attached credit card informatic PTO-2038.	on authorization form						
WARNI	NG: C	redit card information should not be included on this form as it may become p	ublic.						
\boxtimes		Charge any additional fees required by this paper or credit any overpayment manner authorized above.							
		A duplicate of this paper is attached.							

FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases.

Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986 (1065 O.G. 31-33).

6. If any additional extension and/or fee is required, charge Deposit Account No. **20-0090**.

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 20-0090.

SIGNATURE OF PRACTIZIONER

ROBERT N. LIPCSIK

(type or print name of attorney)

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& Tummino L.L.P.

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